

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): \_\_\_\_\_

Chapter you are filing under:

- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

**F I L E D**  
 UNITED STATES BANKRUPTCY COURT  
 NORTHERN DISTRICT OF ILLINOIS

Check if this is an  
 amended filing

AUG 13 2018

Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### **Part 1: Identify Yourself**

#### **1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

##### **About Debtor 1:**

George

First name

Stephen

Middle name

Reinhart

Last name

Suffix (Sr., Jr., II, III)

##### **About Debtor 2 (Spouse Only in a Joint Case):**

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

#### **2. All other names you have used in the last 8 years**

Include your married or maiden names.

Not applicable

First name

Middle name

Last name

#### **3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx - xx - 8 8 2 4

OR

9 xx - xx - \_\_\_\_\_

xxx - xx - \_\_\_\_\_

OR

9 xx - xx - \_\_\_\_\_

Debtor 1

George Stephen Reinhart

First Name Middle Name Last Name

Case number (if known)

**About Debtor 1:**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and doing business as names

I have not used any business names or EINs.

Uber Driver

Business name

Business name

8 0 0 8 9 6 4 5 5  
EIN

EIN — — — — —

**About Debtor 2 (Spouse Only in a Joint Case):**

I have not used any business names or EINs.

Business name

Business name

EIN — — — — —

EIN — — — — —

**5. Where you live**

7819 Island Ln

Number Street

Wonder Lake IL 60097

City State ZIP Code

McHenry

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**If Debtor 2 lives at a different address:**

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1

George Stephen Reinhart

First Name

Middle Name

Last Name

Case number (if known)

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

**8. How you will pay the fee**

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

No

Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

No

Yes. Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

**11. Do you rent your residence?**

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

George Stephen Reinhart

First Name

Middle Name

Last Name

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.

Yes. Name and location of business

Uber Driver

Name of business, if any

7819 Island Ln

Number Street

Wonder Lake

City

IL

State

60097

ZIP Code

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

*Check the appropriate box to describe your business:*

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No

Yes. What is the hazard? \_\_\_\_\_

If immediate attention is needed, why is it needed? \_\_\_\_\_

Where is the property? \_\_\_\_\_

Number Street

City

State

ZIP Code

Debtor 1

George Stephen Reinhart

First Name Middle Name Last Name

Case number (if known)

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

George Stephen Reinhart

First Name Middle Name Last Name

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

**16. What kind of debts do you have?**

**16a. Are your debts primarily consumer debts?** *Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."*

- No. Go to line 16b.  
 Yes. Go to line 17.

**16b. Are your debts primarily business debts?** *Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.*

- No. Go to line 16c.  
 Yes. Go to line 17.

**16c. State the type of debts you owe that are not consumer debts or business debts.**

**17. Are you filing under Chapter 7?**

No. I am not filing under Chapter 7. Go to line 18.

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  
 No  
 Yes

**18. How many creditors do you estimate that you owe?**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

**19. How much do you estimate your assets to be worth?**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**20. How much do you estimate your liabilities to be?**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**Part 7: Sign Below**

**For you**

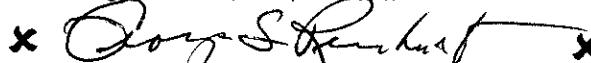
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.



Signature of Debtor 1

Executed on 8/13/2018  
 MM / DD / YYYY

Signature of Debtor 2

Executed on    
 MM / DD / YYYY

Debtor 1

George Stephen Reinhart

First Name Middle Name

Last Name

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

NOT APPLICABLE

Signature of Attorney for Debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

ZIP Code

Contact phone

Email address

Bar number

State

Debtor 1

George Stephen Reinhart

First Name

Middle Name

Last Name

Case number (if known)

**For you if you are filing this bankruptcy without an attorney**

**If you are represented by an attorney, you do not need to file this page.**

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

- No  
 Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

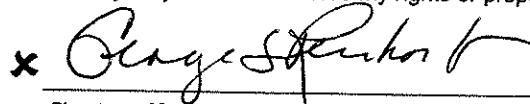
- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

- No  
 Yes. Name of Person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

  
x \_\_\_\_\_ x

Signature of Debtor 1

Date

8/13/2018  
MM / DD / YYYY

Signature of Debtor 2

Date

MM / DD / YYYY

Contact phone (815) 388-2206

Contact phone \_\_\_\_\_

Cell phone (815) 388-2206

Cell phone \_\_\_\_\_

Email address georgeman7@comcast.net

Email address \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	George S Reinhart		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _____ District of _____			
Case number (if known) _____			

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

Your assets	
Value of what you own	
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$ 175,000.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$ 8,679.21
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	\$ 183,679.21

#### Part 2: Summarize Your Liabilities

Your liabilities	
Amount you owe	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$ 217,714.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ .....
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	\$ .....
	+ \$ 24,373.48
Your total liabilities	
\$ 242,087.48	

#### Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ 1,856.00
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ 3,709.00

**Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

- Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.**

\$ 1,856.00

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:****Total claim****From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.) \$ \_\_\_\_\_

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ \_\_\_\_\_

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ \_\_\_\_\_

9d. Student loans. (Copy line 6f.) \$ \_\_\_\_\_

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ \_\_\_\_\_

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ \_\_\_\_\_

9g. **Total.** Add lines 9a through 9f. \$ 0.00

Fill in this information to identify your case and this filing:

Debtor 1	George S Reinhart	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: _____ District of _____		
Case number: _____		

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.  
 Yes. Where is the property?

###### 1.1. 7819 Island Ln

Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?  
\$ 175,000.00 \$ 175,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

fee simple

Check if this is community property (see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

If you own or have more than one, list here:

###### 1.2.

Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?  
\$ \_\_\_\_\_ \$ \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

City State ZIP Code

Who has an interest in the property? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Check if this is community property (see instructions)

County

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

<p>1.3. <b>Street address, if available, or other description</b></p> <hr/> <p>City _____ State _____ ZIP Code _____</p> <p>County _____</p>	<p><b>What is the property? Check all that apply.</b></p> <p><input type="checkbox"/> Single-family home  <input type="checkbox"/> Duplex or multi-unit building  <input type="checkbox"/> Condominium or cooperative  <input type="checkbox"/> Manufactured or mobile home  <input type="checkbox"/> Land  <input type="checkbox"/> Investment property  <input type="checkbox"/> Timeshare  <input type="checkbox"/> Other _____</p> <p><b>Who has an interest in the property? Check one.</b></p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><b>Other information you wish to add about this item, such as local property identification number:</b> _____</p>	<p><b>Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i>.</b></p> <table border="0"> <tr> <td style="vertical-align: top; padding-right: 20px;"><b>Current value of the entire property?</b></td> <td style="vertical-align: top;"><b>Current value of the portion you own?</b></td> </tr> <tr> <td style="text-align: right;"><hr/>\$ _____</td> <td style="text-align: right;"><hr/>\$ _____</td> </tr> </table> <p><b>Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.</b> _____</p> <p><input type="checkbox"/> <b>Check if this is community property (see instructions)</b></p>	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>	<hr/> \$ _____	<hr/> \$ _____
<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>					
<hr/> \$ _____	<hr/> \$ _____					

## Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.**

### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

Yes

3.1. Make:	Nissan
Model:	Altima
Year:	2014
Approximate mileage:	85000

**Other information:**

1. *What is the primary purpose of the study?*

**Who has an interest in the property? Check one**

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property (see instructions)

**Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**

**Current value of the entire property?      Current value of the portion you own?**

\$ 7,500.00      \$ 7,500.00

If you own or have more than one, describe here:

3.2. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Approximate mileage: \_\_\_\_\_  
Other information: \_\_\_\_\_  
\_\_\_\_\_

**Who has an interest in the property? Check one**

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property (see instructions)

**Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.**

**Current value of the entire property?      Current value of the portion you own?**

First Name Middle Name Last Name

Case number (if known)

3.3. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information: \_\_\_\_\_

Who has an interest in the property? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

3.4. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information: \_\_\_\_\_

Who has an interest in the property? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

## 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

4.1. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Other information: \_\_\_\_\_

Who has an interest in the property? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Other information: \_\_\_\_\_

Who has an interest in the property? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ..... →

\$ 7,500.00

**Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?****Do not deduct secured claims or exemptions.****6. Household goods and furnishings***Examples: Major appliances, furniture, linens, china, kitchenware* No Yes. Describe.....

2 Beds, 2 Couches, 1 Desk, 2 Dressers, Dining Room Set,

\$ 350.00

**7. Electronics***Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games* No Yes. Describe.....

TV, Computer

\$ 300.00

**8. Collectibles of value***Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles* No Yes. Describe.....

\$

**9. Equipment for sports and hobbies***Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments* No Yes. Describe.....

Golf Clubs

\$ 150.00

**10. Firearms***Examples: Pistols, rifles, shotguns, ammunition, and related equipment* No Yes. Describe.....

\$

**11. Clothes***Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories* No Yes. Describe.....

\$ 150.00

**12. Jewelry***Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver* No Yes. Describe.....

\$

**13. Non-farm animals***Examples: Dogs, cats, birds, horses* No Yes. Describe.....

\$

**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

TOOLS

\$ 175.00

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

\$ 1,125.00

**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes .....

Cash: ..... \$ 7.00

**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes .....

Institution name:

17.1. Checking account:	USAA 4157	\$ 28.66
17.2. Checking account:	USAA 4254	\$ 18.55
17.3. Savings account:	.....	\$ .....
17.4. Savings account:	.....	\$ .....
17.5. Certificates of deposit:	.....	\$ .....
17.6. Other financial account:	.....	\$ .....
17.7. Other financial account:	.....	\$ .....
17.8. Other financial account:	.....	\$ .....
17.9. Other financial account:	.....	\$ .....

**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes .....

Institution or issuer name:

.....	\$ .....
.....	\$ .....
.....	\$ .....

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them .....

Name of entity:

% of ownership:

0% %

\$ .....

0% %

\$ .....

0% %

\$ .....

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them.....

Issuer name:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan:

\_\_\_\_\_

\$ \_\_\_\_\_

Pension plan:

\_\_\_\_\_

\$ \_\_\_\_\_

IRA:

\_\_\_\_\_

\$ \_\_\_\_\_

Retirement account:

\_\_\_\_\_

\$ \_\_\_\_\_

Keogh:

\_\_\_\_\_

\$ \_\_\_\_\_

Additional account:

\_\_\_\_\_

\$ \_\_\_\_\_

Additional account:

\_\_\_\_\_

\$ \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes .....

Institution name or individual:

Electric:

\_\_\_\_\_

\$ \_\_\_\_\_

Gas:

\_\_\_\_\_

\$ \_\_\_\_\_

Heating oil:

\_\_\_\_\_

\$ \_\_\_\_\_

Security deposit on rental unit:

\_\_\_\_\_

\$ \_\_\_\_\_

Prepaid rent:

\_\_\_\_\_

\$ \_\_\_\_\_

Telephone:

\_\_\_\_\_

\$ \_\_\_\_\_

Water:

\_\_\_\_\_

\$ \_\_\_\_\_

Rented furniture:

\_\_\_\_\_

\$ \_\_\_\_\_

Other:

\_\_\_\_\_

\$ \_\_\_\_\_

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)** No Yes .....

Issuer name and description:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.  
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- No  
 Yes .....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- No  
 Yes. Give specific information about them....

\_\_\_\_\_ \$ \_\_\_\_\_

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- No  
 Yes. Give specific information about them....

\_\_\_\_\_ \$ \_\_\_\_\_

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- No  
 Yes. Give specific information about them....

\_\_\_\_\_ \$ \_\_\_\_\_

Money or property owed to you?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- No  
 Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

IRS Rebate of 493.00 Already allocated to  
Treasure payment of Veterans Administration  
Health care bills

Federal: \$ \_\_\_\_\_  
State: \$ \_\_\_\_\_  
Local: \$ \_\_\_\_\_

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- No  
 Yes. Give specific information.....

Alimony: \$ \_\_\_\_\_  
Maintenance: \$ \_\_\_\_\_  
Support: \$ \_\_\_\_\_  
Divorce settlement: \$ \_\_\_\_\_  
Property settlement: \$ \_\_\_\_\_

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- No  
 Yes. Give specific information.....

\_\_\_\_\_ \$ \_\_\_\_\_

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value. . . . .

Company name:

Beneficiary:

Surrender or refund value:

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information. ....

\_\_\_\_\_ \$ \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim. ....

\_\_\_\_\_ \$ \_\_\_\_\_

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No

Yes. Describe each claim. ....

\_\_\_\_\_ \$ \_\_\_\_\_

**35. Any financial assets you did not already list**

No

Yes. Give specific information. ....

\_\_\_\_\_ \$ \_\_\_\_\_

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here . . . . . →**

\_\_\_\_\_ \$ 54.21

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.

Yes. Go to line 38.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

No

Yes. Describe....

\_\_\_\_\_ \$ \_\_\_\_\_

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe....

\_\_\_\_\_ \$ \_\_\_\_\_

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No

Yes. Describe.....

	\$
--	----

41. Inventory

No

Yes. Describe.....

	\$
--	----

42. Interests in partnerships or joint ventures

No

Yes. Describe..... Name of entity:

% of ownership:

_____	%	\$ _____
_____	%	\$ _____
_____	%	\$ _____

43. Customer lists, mailing lists, or other compilations

No

Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No

Yes. Describe.....

	\$
--	----

44. Any business-related property you did not already list

No

Yes. Give specific information .....

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here .....



\$ _____
----------

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest in. If you own or have an interest in farmland, list it in Part 1.**

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

**Current value of the portion you own?**

**Do not deduct secured claims or exemptions.**

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No

Yes .....

_____	\$ _____
-------	----------

## 48. Crops—either growing or harvested

 No Yes. Give specific information.....

	\$ _____
--	----------

## 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes.....

	\$ _____
--	----------

## 50. Farm and fishing supplies, chemicals, and feed

 No Yes.....

	\$ _____
--	----------

## 51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information.....

	\$ _____
--	----------

## 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here .....



	\$ _____
--	----------

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

## 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information.....

	\$ _____
	\$ _____
	\$ _____

## 54. Add the dollar value of all of your entries from Part 7. Write that number here .....



	\$ _____
--	----------

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 .....



\$ 175,000.00

56. Part 2: Total vehicles, line 5

\$ 7,500.00

57. Part 3: Total personal and household items, line 15

\$ 1,125.00

58. Part 4: Total financial assets, line 36

\$ 54.21

59. Part 5: Total business-related property, line 45

\$ \_\_\_\_\_

60. Part 6: Total farm- and fishing-related property, line 52

\$ \_\_\_\_\_

61. Part 7: Total other property not listed, line 54

+\$ \_\_\_\_\_

62. Total personal property. Add lines 56 through 61. ....

\$ 8,679.21

Copy personal property total

+\$ 8,679.21

63. Total of all property on Schedule A/B. Add line 55 + line 62....

\$ 183,679.21

Fill in this information to identify your case:

Debtor 1	George S Reinhart	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: _____ District of _____		
Case number (If known) _____		

Check if this is an amended filing

## Official Form 106C

**Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: Line from <i>Schedule A/B:</i>	\$175,000.00 Copy the value from <i>Schedule A/B</i>	<input checked="" type="checkbox"/> \$ 15,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12 - 901
Brief description: Line from <i>Schedule A/B:</i>	\$7,500.00 2014 ALTIMA	<input checked="" type="checkbox"/> \$ 2,400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12 - 1001(c)
Brief description: Line from <i>Schedule A/B:</i>	\$350.00 Household Goods	<input checked="" type="checkbox"/> \$ 350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12 - 1001(b)

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <i>Copy the value from Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption</i>	Specific laws that allow exemption
Brief description: <u>Electronics</u>	\$ <u>300.00</u>	<input checked="" type="checkbox"/> \$ <u>300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12 1001(b)
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Golf Clubs</u>	\$ <u>150.00</u>	<input checked="" type="checkbox"/> \$ <u>150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12 1001(b)
Line from Schedule A/B: <u>9</u>			
Brief description: <u>Tools</u>	\$ <u>175.00</u>	<input checked="" type="checkbox"/> \$ <u>175.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12 1001(b)
Line from Schedule A/B: <u>14</u>			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			

Fill in this information to identify your case:

Debtor 1	George S Reinhart		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _____ District of _____			
Case number (if known) _____			

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.1 Nationstar Mortgage	\$ 207,272.00	\$ 175,000.00	\$ 32,272.00
Creditor's Name PO Box 650660 Number Street #1803733029	Describe the property that secures the claim: 7819 Island Ln Wonder Lake IL 60097		
Dallas TX 75265 City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who owes the debt? Check one.	Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
Date debt was incurred 1/2015	Last 4 digits of account number 3029		
2.2 Nissan Motor Accept	Describe the property that secures the claim: 2014 NISSAN ALTIMA	\$ 10,442.00	\$ 7,500.00 \$ 2,942.00
Creditor's Name PO Box 742658 Number Street #0010242878239000	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Cincinnati OH 45274 City State ZIP Code	Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
Who owes the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred 6/2015	Last 4 digits of account number 9000		
Add the dollar value of your entries in Column A on this page. Write that number here: \$ 217,714.00			

Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				
<p>Creditor's Name _____</p> <p>Number Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p>Date debt was incurred _____</p>		<p>Describe the property that secures the claim: \$ _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Last 4 digits of account number _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Creditor's Name _____</p> <p>Number Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p>Date debt was incurred _____</p>		<p>Describe the property that secures the claim: \$ _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Last 4 digits of account number _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Creditor's Name _____</p> <p>Number Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p>Date debt was incurred _____</p>		<p>Describe the property that secures the claim: \$ _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Last 4 digits of account number _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>Add the dollar value of your entries in Column A on this page. Write that number here:</b> \$ <b>217,714.00</b></p> <p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ <b>217,714.00</b></p>				

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	Name			On which line in Part 1 did you enter the creditor? _____
Number Street			Last 4 digits of account number _____	
City State ZIP Code			On which line in Part 1 did you enter the creditor? _____	
<input type="checkbox"/>	Name			Last 4 digits of account number _____
Number Street			On which line in Part 1 did you enter the creditor? _____	
City State ZIP Code			Last 4 digits of account number _____	
<input type="checkbox"/>	Name			On which line in Part 1 did you enter the creditor? _____
Number Street			Last 4 digits of account number _____	
City State ZIP Code			On which line in Part 1 did you enter the creditor? _____	
<input type="checkbox"/>	Name			Last 4 digits of account number _____
Number Street			On which line in Part 1 did you enter the creditor? _____	
City State ZIP Code			Last 4 digits of account number _____	
<input type="checkbox"/>	Name			On which line in Part 1 did you enter the creditor? _____
Number Street			Last 4 digits of account number _____	
City State ZIP Code			On which line in Part 1 did you enter the creditor? _____	
<input type="checkbox"/>	Name			Last 4 digits of account number _____
Number Street			On which line in Part 1 did you enter the creditor? _____	
City State ZIP Code			Last 4 digits of account number _____	

Fill in this information to identify your case:

6 of 42

Debtor 1	George S Reinhart		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _____ District of _____			
Case number (if known) _____			

Check if this is an  
amended filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- No  
 Yes

2.2

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- No  
 Yes

## Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

## Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- No  
 Yes

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

## Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- No  
 Yes

Priority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

## Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Is the claim subject to offset?

- No  
 Yes

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.****4.1 HOME DEPOT/CITI CREDIT**

Nonpriority Creditor's Name

PO BOX 20507

Number Street

KANSAS CITY

MO

64195

City

State

ZIP Code

Total claim

Last 4 digits of account number 0 2 6 4\$ 3,410.00When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify CREDIT CARD

**4.2 MERRICK BANK**

Nonpriority Creditor's Name

PO BOX 660702

Number Street

DALLAS

TX

75266

City

State

ZIP Code

Last 4 digits of account number 2 2 3 4\$ 3,879.00When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify CREDIT CARD

**4.3 CAPITAL ONE**

Nonpriority Creditor's Name

PO BOX 71087

Number Street

CHARLOTTE

NC

28272

City

State

ZIP Code

Last 4 digits of account number 0 6 5 7\$ 3,050.00When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify CREDIT CARD

## Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

## CAPITAL ONE

Nonpriority Creditor's Name

PO BOX 71087

Number Street  
CHARLOTTE NC 28272  
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 0 4 8 9

\$ 1,250.00

When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify CREDIT CARD

4.5

## DISCOVER

Nonpriority Creditor's Name

PO BOX 6103  
Number Street  
CAROL STREAM IL 60197  
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 4 8 2 0

\$ 6,955.00

When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify CREDIT CARD

4.6

## USAA VISA

Nonpriority Creditor's Name

10750 MCDERMOTT PKWY  
Number Street  
SAN ANTONIO TX 78288  
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 8 7 4 9

\$ 3,937.00

When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

## Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

A7

## Menards

Nonpriority Creditor's Name

PO Box 71106

Number Street

Charlotte

NC

28272

City

State

ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 5 5 2 7

\$ 500.00

When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

A8

## Wal Mart

Nonpriority Creditor's Name

PO Box 530927

Number Street

Atlanta

GA

30353

City

State

ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 6 1 8 9

\$ 661.00

When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

A9

## Veterans Administration

Nonpriority Creditor's Name

James Lovel Health Center

Number Street

North Chicago

IL

City

State

ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 8 8 2 4

\$ 731.48

When was the debt incurred? 08/13/2018

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify VA Health

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

BLITT GAINES

Name

661 GLENN AVE

Number Street

WHEELING

IL 60090

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 0457

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

## Part 4:

## Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.  
Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations  
6b. Taxes and certain other debts you owe the government  
6c. Claims for death or personal injury while you were intoxicated  
6d. Other. Add all other priority unsecured claims.  
Write that amount here.

## Total claim

6a. \$ \_\_\_\_\_  
6b. \$ \_\_\_\_\_  
6c. \$ \_\_\_\_\_  
6d. + \$ 0

6e. Total. Add lines 6a through 6d.

6e. \$ 0

Total claims from Part 2

- 6f. Student loans  
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
6h. Debts to pension or profit-sharing plans, and other similar debts  
6i. Other. Add all other nonpriority unsecured claims.  
Write that amount here.

## Total claim

6f. \$ \_\_\_\_\_  
6g. \$ \_\_\_\_\_  
6h. \$ \_\_\_\_\_  
6i. + \$ 24,373.48

6j. Total. Add lines 6f through 6i.

6j. \$ 24,373.48

Fill in this information to identify your case:

Debtor 1	George S Reinhart		
First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		District of	
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

#### 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

#### Employment status

#### Debtor 1

- Employed  
 Not employed

#### Debtor 2 or non-filing spouse

- Employed  
 Not employed

#### Occupation

\_\_\_\_\_

\_\_\_\_\_

#### Employer's name

\_\_\_\_\_

\_\_\_\_\_

#### Employer's address

Number Street

Number Street

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City State ZIP Code

City State ZIP Code

How long employed there?

\_\_\_\_\_

\_\_\_\_\_

### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

#### For Debtor 1

#### For Debtor 2 or non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ \_\_\_\_\_ \$ \_\_\_\_\_

3. Estimate and list monthly overtime pay.

3. + \$ \_\_\_\_\_ + \$ \_\_\_\_\_

4. Calculate gross income. Add line 2 + line 3.

4. \$ \_\_\_\_\_ \$ \_\_\_\_\_

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>
<b>Copy line 4 here.....</b>	→ 4. \$ _____	\$ _____
<b>5. List all payroll deductions:</b>		
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a. \$ _____	\$ _____
5b. <b>Mandatory contributions for retirement plans</b>	5b. \$ _____	\$ _____
5c. <b>Voluntary contributions for retirement plans</b>	5c. \$ _____	\$ _____
5d. <b>Required repayments of retirement fund loans</b>	5d. \$ _____	\$ _____
5e. <b>Insurance</b>	5e. \$ _____	\$ _____
5f. <b>Domestic support obligations</b>	5f. \$ _____	\$ _____
5g. <b>Union dues</b>	5g. \$ _____	\$ _____
5h. <b>Other deductions. Specify: _____</b>	5h. + \$ _____	+ \$ _____
<b>6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.</b>	<b>6. \$ _____</b>	\$ _____
<b>7. Calculate total monthly take-home pay. Subtract line 6 from line 4.</b>	<b>7. \$ _____</b>	\$ _____
<b>8. List all other income regularly received:</b>		
8a. <b>Net income from rental property and from operating a business, profession, or farm</b>  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ _____	\$ _____
8b. <b>Interest and dividends</b>	8b. \$ _____	\$ _____
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b>  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____
8d. <b>Unemployment compensation</b>	8d. \$ _____	\$ _____
8e. <b>Social Security</b>	8e. \$ <u>1,856.00</u>	\$ _____
8f. <b>Other government assistance that you regularly receive</b>  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: <u>II Hardest Hit program pays 6 months 1617.00/ Mo</u>	8f. \$ _____	\$ _____
8g. <b>Pension or retirement income</b>	8g. \$ _____	\$ _____
8h. <b>Other monthly income. Specify: _____</b>	8h. + \$ _____	+ \$ _____
<b>9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.</b>	<b>9. \$ <u>1,856.00</u></b>	\$ _____
<b>10. Calculate monthly income. Add line 7 + line 9.</b>  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>1,856.00</u> + \$ _____	= \$ <u>1,856.00</u>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify: <u>II Hardest Hit program pays 6 months 1617.00/ Mo</u>	11. + \$ _____	\$ _____
<b>12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.</b>  Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ <u>1,856.00</u>	Combined monthly income
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input type="checkbox"/> <b>No.</b>		
<input checked="" type="checkbox"/> <b>Yes. Explain:</b> decrease II Hardest hit will stop Feb 2019		

Fill in this information to identify your case:

Debtor 1	George S Reinhart	
	First Name	Middle Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the:	District of _____	
Case number (if known)	_____	

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

No

Do not list Debtor 1 and Debtor 2.

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

No

Yes

No

Yes

No

Yes

No

Yes

No

Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses  
 4. \$ 1,742.00

If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

4a. \$ \_\_\_\_\_  
 4b. \$ \_\_\_\_\_  
 4c. \$ \_\_\_\_\_  
 4d. \$ \_\_\_\_\_

Debtor 1

George S Reinhart

First Name Middle Name

Last Name

Case number (if known)

**Your expenses**

5. Additional mortgage payments for your residence, such as home equity loans	5. \$ _____
<b>6. Utilities:</b>	
6a. Electricity, heat, natural gas	6a. \$ 130.00
6b. Water, sewer, garbage collection	6b. \$ 20.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 225.00
6d. Other. Specify: _____	6d. \$ _____
<b>7. Food and housekeeping supplies</b>	7. \$ 350.00
<b>8. Childcare and children's education costs</b>	8. \$ _____
<b>9. Clothing, laundry, and dry cleaning</b>	9. \$ 45.00
<b>10. Personal care products and services</b>	10. \$ 15.00
<b>11. Medical and dental expenses</b>	11. \$ 35.00
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 135.00
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ 15.00
<b>14. Charitable contributions and religious donations</b>	14. \$ 15.00
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ _____
15b. Health insurance	15b. \$ _____
15c. Vehicle insurance	15c. \$ 78.00
15d. Other insurance. Specify: _____	15d. \$ _____
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ _____
<b>17. Installment or lease payments:</b>	
17a. Car payments for Vehicle 1	17a. \$ 359.00
17b. Car payments for Vehicle 2	17b. \$ _____
17c. Other. Specify: _____	17c. \$ _____
17d. Other. Specify: _____	17d. \$ _____
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ _____
<b>19. Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ _____
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a. Mortgages on other property	20a. \$ _____
20b. Real estate taxes	20b. \$ _____
20c. Property, homeowner's, or renter's insurance	20c. \$ _____
20d. Maintenance, repair, and upkeep expenses	20d. \$ _____
20e. Homeowner's association or condominium dues	20e. \$ _____

Debtor 1

George S Reinhart

First Name Middle Name

Last Name

Case number (if known)

21. Other. Specify: credit cards

21. +\$ 545.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 3,709.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 3,709.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 1,856.00

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 3,709.00

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ -1,853.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

**Fill in this information to identify your case:**

Debtor 1	<b>George S Reinhart</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _____ District of _____			
Case number (if known)	_____		

Check if this is an amended filing

Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

**Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?**

No

Yes. Name of person \_\_\_\_\_

*. Attach Bankruptcy Petition Preparer's Notice, Declaration, and*

**Signature (Official Form 119).**

**Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.**

George S. Rushforth

**Signature of Debtor Y**

---

**Signature of Debtor 2**

Date 8/13/12  
MM / DD / YYYY

Date \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	George S Reinhart	
	First Name	Middle Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: _____ District of _____		
Case number (if known) _____		

Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

Creditor's name: NATIONSTAR MORTGAGE

Surrender the property.

No

Description of property securing debt: SINGLE FAMILY HOME  
7819 ISLAND LN  
WONDER LAKE, IL 60097  
PRIMARY RESIDENCE

Retain the property and redeem it.

Yes

Retain the property and enter into a Reaffirmation Agreement.

Retain the property and [explain]: \_\_\_\_\_

Creditor's name: NISSAN MOTOR ACCEPTANCE

Surrender the property.

No

Description of property securing debt: 2014 NISSAN ALTIMA  
LOAN 0010242878239000

Retain the property and redeem it.

Yes

Retain the property and enter into a Reaffirmation Agreement.

Retain the property and [explain]: \_\_\_\_\_

Creditor's name:

Surrender the property.

No

Description of property securing debt:

Retain the property and redeem it.

Yes

Retain the property and enter into a Reaffirmation Agreement.

Retain the property and [explain]: \_\_\_\_\_

Creditor's name:

Surrender the property.

No

Description of property securing debt:

Retain the property and redeem it.

Yes

Retain the property and enter into a Reaffirmation Agreement.

Retain the property and [explain]: \_\_\_\_\_

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in **Schedule G: Executory Contracts and Unexpired Leases** (Official Form 106G), fill in the information below. Do not list real estate leases. **Unexpired leases** are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases****Will the lease be assumed?**

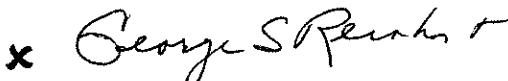
Lessor's name:

 No Yes

Description of leased property:

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

 x

Signature of Debtor 1

8/13/2018  
Date MM / DD / YYYY

x

Signature of Debtor 2

Date MM / DD / YYYY

In Re: )  
George Stephen Reinhart ) Case No.  
Debtor ) Chapter 7  
)

List of Creditors (1)

August 13, 2018

USAA Federal Savings / Nationstar Mortgage  
PO Box 650660 Dallas, TX 75265-0660

Balance \$207,272.00

Nissan Motor Acceptance  
PO Box 742658 Cincinnati OH 45274-2658  
-----

Balance \$10,442.03

Home Depot/CitiCorp Credit Services  
PO Box 20507 Kansas City Missouri 64195

Balance \$3,410.00

Merrick Bank  
PO Box 660702 Dallas, TX 75266-0702

Balance \$3,879.00

Capital One  
PO Box 71087  
Charlotte, NC 28272-1087

Balance \$3,050.00

Capital One  
PO Box 71087  
Charlotte, NC 28272-1087

Balance \$1,250.00

Discover  
PO Box 6103  
Carol Stream, IL 60197-6103

Balance \$6955.00

George Stephen Reinhart

List of Creditors (2)

USAA Visa Credit Card Services  
10750 McDermott Pkwy San Antonio, TX 78288-0570

Bal \$3937.00

Menards Capital One Retail Services  
PO Box 71106  
Charlotte NC 28272-1106

Balance \$500.00

WalMart / Synchrony Bank  
PO Box 530927 Atlanta, GA 30353-0927

Balance \$661.42

Veterans Administration  
Lovell Medical Center  
North Chicago IL  
Balance \$281.00

US Treasury / Veterans Administration  
Balance \$450.48